10734895

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

788 46 501

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	
_		<u>.</u>	(Column 1)		(Column 2)		1	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			\\ minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*			X43=		OR	X86=	
ML	JLTIPLE DEPEN	NDENT CLAIM PI	ESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter *0					"0" in c	column 2		TOTAL		OR	TOTAL	<i>11a</i>
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OTHER SMALL		
_		(Column 1)	ī	HIGH		(Column 3)	1		ADDI-	OR I		ADDI-
AMENDMENT A	4/25/00	REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	. 3	Minus	-~	W)	= /		X\$ 9=	,	OR	X\$18=	
	Independent	NTATION OF MU	Minus	(<u>3</u>	=/		X43=		OR	X86=	
	FIRST PRESE	INTATION OF MIC	JETTPLE DET	EINDENT	CLAIN	<u>* _ _ _ _ _ _ _ _ _ </u>	, [+145=		OR	+290=	/
•								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												_
AMENDMENT 9		CLAIMS REMAINING		HIGH	EST	PRESENT	1 r		ADDI-			ADDI-
		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	$\ \ $	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	IJ	X43=	•	OR	X86=	
`	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		J ∱					
								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA] :	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		= ·		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	tet		=	l t	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										Un		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										+290= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE												{
		ber Previously Paid					er four	nd in the app	ropriate box	in col	umn 1.	